STATE OF SOUTH DAKOTA Statement of Legal Newspaper Ownership and Circulation

Return to. Secretary of State, 500 E	c. Capitol, Pierre, SD 3730	1-3077
1. TITLE OF NEWSPAPER Plain (Man) 2. DATE 9-29-13		
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS	TO DESCRIPTION OF PERSONS ASSESSED TO SERVICE	ANNUAL SUBSCRIPTION CE \$ 1/-72
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF		
(Not printers)		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE		
NEWS Media Corporation 241 Hm 37 E Rochelle, IL 61068		
6. FULL NAME OF PUBLISHER: Wark & Dais		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the		
names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name		
and address, as well as that of each individual must be given. FULL NAME COMPLETE MAILING ADDRESS		
Price		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I		
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		
Wells Fargo Barch	- + Narquette	Minneapolis, un So4
O	AVERAGENO. COPIES EACH	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	ISSUED PRECEDING 12 MONTHS	ISSUED NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run)	6130	6567
B.PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and	2864	421
counter sales.	3001	1301
2. Mail Subscription (Paid and or requested)	1430	1415
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	5294	5716
D.FREE DISTRIBUTION	56	41
1. BY MAIL, CARRIER OR OTHER MEANS	35	
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	453	457
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	5782	6317
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	348	350
2. Return from News Agents		
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	6130	6567
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public		
I swear that the statements made by me are true, correct, and complete:		
Ill until		
(Signature) (Title)		
State of South Dakota) Sworn to before me this 14 day of Oct , 2013		
s Shley Neuharth		
County of Beache) Notary Public My commission expires: 1015117		

(Seal)